PTO/SB/21 (09-06)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/827,353 – Conf. #2617		
Filing Date	April 20, 2004		
First Named Inventor	Michael B. Zemel		
Art Unit	1616		
Examiner Name	E.J. Webman		
Attorney Docket Number	31894-199297		

Total Number of Pages in This Submiss	ion Attorney Docket N	31894-199297					
ENCLOSURES (Check all that apply)							
X Fee Transmittal Form	Drawing(s)	After Allowance Communication to TC					
x Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences					
x Response	Petition	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)					
After Final	Petition to Convert to a Provisional Application	Proprietary Information					
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter					
x Extension of Time Request	X Terminal Disclaimer	T Other Enclosure(s) (please Identify below):					
Express Abandonment Request	Request for Refund	Form PTO SB08A/B					
x IDS (w/21 references)	CD, Number of CD(s)	_					
Certified Copy of Priority Document(s)	Landscape Table on CD						
Reply to Missing Parts/ Remarks							
Reply to Missing Parts under 37 CFR 1.52 or 1.53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Name VENABLE LLP	. 1.						
Signature							
Printed name Zayo Alathari Zayo Alathari							
Date Teb. 1	3, WY	No. 42,256					

PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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Effective on 12/08/2004.

Complete if Known

Effective on 12/08/2004.		10/827 353 Conf. #2617					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Nun		10/827,353-Conf. #2617 April 20, 2004			
FEE TRANSMITTAL		Filing Date		lichael B. Zem	nel		
For FY 2008		First Named Inv Examiner Name	OTILOT	E. J. Webman			
Applicant claims small entity status. See 37 CFR 1.27		Art Unit 1616					
TOTAL AMOUNT OF PAYMENT (\$) 770.00			Attorney Docket No. 31894-199297				
		Attorney Booker	1.0.				
METHOD OF PAYMENT (check	all that apply)				_		
Check Credit Card Money Order None Other (please identify):							
X Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP							
For the above-identified dep	osit account, the Director	is hereby authorize	ed to: (check	all that apply)			
x Charge fee(s) indicate	d below	Charg	e fee(s) indi	cated below, ex	cept for the filing fee		
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION			·- ·- ·-				
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES						
F		EARCH FEES Small Entity	EXAMIN	ATION FEES Small Entity			
Application Type Fee (Small Entity 5) Fee (\$) Fee		Fee (\$)	Fee (\$)	Fees Paid (\$)		
Utility 310	155 510	255	210	105			
Design 210	105 100	50	130	65			
Plant 210	105 310	155	160	80			
Reissue 310	155 - 510	255	620	310			
Provisional 210	105	0	0	0			
2. EXCESS CLAIM FEES					Small Entity		
Fee Description Each claim over 20 (including Reis	sues)				Fee (\$) Fee (\$) 50 25		
Each independent claim over 3 (inc					210 105		
Multiple dependent claims					370 185		
<u>Total Claims</u> Extra Claims	Fee (\$) Fee	Paid (\$)	· <u>Mu</u>	Itiple Depende	nt Claims		
20 ±		4. 40-	<u>Fee</u>	<u>• (\$) </u>	ee Paid (\$)		
HP = highest number of total claims paid fo							
Indep. Claims Extra Claims		Paid (\$)					
-3 = X = =							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Shee		additional 50 or fra			Fee Paid (\$)		
100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid (\$)							
Terminal Disclaimer Fee IDS Petition Fee					\$130.00 \$180.00		
Other (e.g., late filing surcharge): 1252 Extension for response within second month					\$460.00		
(18)							
SUBMITTED BY	A HILA	Registration No.	40.055	<u></u>	(000) 044 4000		
Signature	W###	(Attorney/Agent)	42,256	Telephone	(202) 344-4000		
Name (Print/Type) Zayd Alexteric	XXXX			Date .	13,2008		